

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BOARD

2007 NOV -1 PM 3:55

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Meyer for City Council

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Brian Meyer

Political Party (if applicable)

Office Sought

4th ward  
Des Moines City Council

District (if Senate or House)

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. #

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Brian Meyer  
SIGNATURE OF PERSON FILING REPORT

255-3994  
TELEPHONE

11-1-07  
DATE SIGNED

I AM FILING A November 1, 2007 REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.  
(report date) Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

4,845

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

14,375

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

\$ 19,220

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

12,094.91

Schedule F: Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$

7,125.09

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Meyer for City Council

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1-1-07	ID# CK#	Robert Milla 2751 99th St Urbandale, IA 50322		\$ 200	<input type="checkbox"/>
1-1-07	ID# CK#	Michael Vessey 208 West Hillcrest Dr. Indianola 50125		250	<input type="checkbox"/>
1-3-07	ID# CK#	Dwayne McAnanich Box 1486 Des Moines IA 50305		200	<input type="checkbox"/>
1-3-07	ID# CK#	Ted Townsend 2425 Hubbell Ave Des Moines IA 50317		250	<input type="checkbox"/>
1-4-07	ID# CK#	Virgil Moore 1815 Penn Ave. DSM		100	<input type="checkbox"/>
1-4-07	ID# CK#	James Conlin 2900 Southern Hills Circle Des Moines, IA 50321		500	<input type="checkbox"/>
1-4-07	ID# CK#	Roxann Conlin 2900 Southern Hills Circle Des Moines, IA 50321		500	<input type="checkbox"/>
1-4-07	ID# CK#	Jeff Hunter 1000 Walnut St. Des Moines, IA 50309		500	<input type="checkbox"/>
1-5-07	ID# CK#	Randy Walters Box 71094 Clive IA 50325		1,712.50	<input type="checkbox"/>
1-5-07	ID# CK#	John Kline 2171 Grand Ave West Des Moines IA 50265		1,712.50	<input type="checkbox"/>
SUB-TOTAL				\$5,925	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3  
(for Schedule A)

For Instructions, See Back of Form

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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COMMITTEE NAME (Must be same as on Statement of Organization)

Meyer for City Council

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1-5-07	ID# CK#	Christine Hensley 753 55th St Des Moines IA 50312		\$ 150	<input type="checkbox"/>
1-5-07	ID# CK#	Gerald Grubb 3301 106th Cir Urbandale IA 50322		500	<input type="checkbox"/>
1-5-07	ID# CK#	Ron Grubb 3301 106th Cir. Urbandale IA 50322		500	<input type="checkbox"/>
1-15-07	ID# CK#	Machelle Shaffer 3307 59th St Des Moines, IA 50322		100	<input type="checkbox"/>
1-18-07	ID# CK#	AIFSCME Council 61 PEOPLE 4320 NW 2nd Des Moines		300	<input type="checkbox"/>
3-9-07	ID# CK#	Gerald Neugent 4949 Westown Pkwy #2000 West Des Moines		1,000	<input type="checkbox"/>
3-12-07	ID# CK#	Bill Knapp II 5221 NW 70th Pl Johnston IA 50131		1,000	<input type="checkbox"/>
3-12-07	ID# CK#	Dwayne McAninch Box 1486 Des Moines 50305		1,000	<input type="checkbox"/>
3-12-07	ID# CK#	Douglas McAninch 3700 Hildren Creek West DSM 50265		\$1,000	<input type="checkbox"/>
10-16-07	ID# CK#	Michael Coppola 4521 Fleur Dr. Suite C Des Moines 50321		\$ 500	<input type="checkbox"/>
SUB-TOTAL				\$ 6,050	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Meyer for City Council

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10-16-07	ID# CK#	Joe Kelly 2206 40th Pl Des Moines IA 50310		\$ 200	<input type="checkbox"/>
10-16-07	ID# CK#	Bill Lillis 3000 Patricia Dr. Des Moines IA 50322		250	<input type="checkbox"/>
10-16-07	ID# CK#	William Van Orsdel 443 SW 6th Des Moines 50309		250	<input type="checkbox"/>
10-19-07	ID# CK#	Eric Tabor 1619 Thornwood Rd West Des Moines IA 50265		100	<input type="checkbox"/>
10-20-07	ID# CK#	Robert Tosten 801 Grand Suite 3900 Des Moines 50309		100	<input type="checkbox"/>
10-20-07	ID# CK#	Ron Wood Prairie Ridge Apts #100 Des Moines 50320		200	<input type="checkbox"/>
10-20-07	ID# CK#	Tom Akers 125 Marlow Parkway DSM		200	<input type="checkbox"/>
10-20-07	ID# CK#	Jerry Crawford 1700 Swan Center DSM, IA 50309		100	<input type="checkbox"/>
10-24-07	ID# CK#	James Conlin 2900 Southern Hills Circle Des Moines IA, 50321		500	<input type="checkbox"/>
10-24-07	ID# CK#	Roxanne Conlin 2900 Southern Hills Circle Des Moines IA 50321		500	<input type="checkbox"/>

SUB-TOTAL

\$ 2,400

TOTAL (if last page of this schedule)

\$ 14,375

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

*Meyers for City Council*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-1-07	ID# CK#	Mac Donald Letter Services 1624 Ohio St. DSM	printing	\$ 740.40
1-3-07	ID# CK#	Postmaster 2nd Ave DSM	Stamps	\$ 960.00
1-3-07	ID# CK#	Polk Co. Auditor 120 2nd Ave DSM	voter List	7.00
1-4-07	ID# CK#	polk Co. Auditor 120 2nd Ave DSM	voter List	8.20
1-4-07	ID# CK#	office max Southdale Plaza DSM	office Supplies	24.23
1-5-07	ID# CK#	Postmaster 2nd Ave DSM	Stamps	1,632
1-5-07	ID# CK#	Auditor 120 2nd Ave DSM	Lists	<del>8.00</del> 8.70
1-6-07	ID# CK#	Postmaster 2nd Ave DSM	Stamps	390

SUB-TOTAL \$ 3770.53

TOTAL (if last page of this schedule) \$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)*Meyer for City Council*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-6-07	ID# CK#	Office Max Southdale Plaza DSM	office supplies	\$ 34.06
1-6-07	ID# CK#	H & Vee 1444 St. DSM	400 x \$.39 Stamps	\$156
1-6-07	ID# CK#	Office Max Southdale Plaza DSM	office supplies	28.94
1-2-07	ID# CK#	Auditor 120 2nd Ave DSM	ABA/Lists	8.90
1-19-07	ID# CK#	The Clinton Group 1350 Connecticut Ave NW, DC	Reverse entry Refund for voter calls	<del>37.31</del>
1-20-07	ID# CK#	Mail Services 4100 121st St. Urbandale, IA	Postage and Mailings	<del>21.29</del> 2,129.95
1-22-07	ID# CK#	MacDonald Letters 1626 Ohio St. DSM	Printing	500.79
3-9-07	ID# CK#	Carter Printing 1739 E. Grand DSM 50314	Printing	\$4,000
SUB-TOTAL				\$ 6,825.70
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 58A.402(3)(i).)

Page 2 of 3

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

*Meyer For City Council*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4-1-07	ID# CK#	Scott Ouths 1209 W. 2nd Apt. D Indianola	reimbursement for office supplies	\$ 411.28
5-21-07	ID# CK#	Carter Patis 1739 E. Grand DSM	Printing of flyers	391.77
8-9-07	ID# CK#	Alexander Gjurich 4316 Medicine Dr. Normal, IL 60211	Phone canvassing	\$500.00
10-25-07	ID# CK#	Mark Langpin 411 60th St. Des Moines	Website Development	200
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,503.05
TOTAL (if last page of this schedule)				\$ 12,094.91

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)